

April 07 , 2006 EOP Mini-Messages

ATTENTION: ALL PROVIDERS

THE RELEASE OF DIRECT DEPOSITS AND CHECKS FOR THIS EOP DEPENDS ON THE AVAILABILITY OF FUNDS. PLEASE VERIFY DIRECT DEPOSIT STATUS WITH YOUR BANK. GO TO WWW.MEDICAID.STATE.AL.US TO VIEW THE PAYMENT DELAY UPDATE DETAILS. PAYMENT ALERTS WILL BE POSTED ONLY IF THERE WILL BE A PAYMENT DELAY.

ATTENTION: DURABLE MEDICAL EQUIPMENT PROVIDERS (097)

THE ALABAMA SUPPLIES, APPLIANCES, AND DURABLE MEDICAL EQUIPMENT FEE SCHEDULE IS NOW AVAILABLE ON THE MEDICAID WEBSITE AT WWW.MEDICAID.STATE.AL.US. EFFECTIVE 04/01/2006 DME RATES WERE UPDATED. TO BE CONSISTENT WITH MEDICARE, EFFECTIVE FOR DATES OF SERVICE 05/01/2006 FORWARD, THREE RENTAL CODES (B4034, B4035, AND B4036) WILL PAY PER DAY INSTEAD OF PER MONTH. FOR THESE CODES, PROVIDERS NEED TO BILL THE ACTUAL NUMBER OF DAYS FOR THE RENTAL INSTEAD OF THE ONE MONTHLY UNIT.

ATTENTION: PHYSICIANS (076)

THE ALABAMA MEDICAID AGENCY IS AWARE OF SOME CLAIM DENIALS FOR OFFICE VISITS (WITH MODIFIER 25) AND ADMINISTRATION CODES. WE ARE WORKING TO CORRECT THE PROBLEM AND WILL NOTIFY YOU AS SOON AS THE PROBLEM IS CORRECTED SO THAT YOU MAY RESUBMIT CLAIMS.

ATTENTION: AUDIOLOGIST AND HEARING PROVIDERS (076)

CORRECTION TO THE MARCH 2006 PROVIDER INSIDER ARTICLE, PAGE 2, "CODES ADDED FOR AUDIOLOGY/HEARING PROVIDERS." THE LAST PARAGRAPH SHOULD READ: PROCEDURE CODE 92507 SHOULD NOT BE BILLED ON THE SAME DAY AS 92630 OR 92633. REFER TO THE BILLING MANUAL, CHAPTER 10 FOR ADDITIONAL INFORMATION.

ATTENTION: ALL PHARMACY PROVIDERS (350)

FOR DRUGS DISPENSED ON OR AFTER 01/01/06, PROVIDERS SHOULD ALWAYS VERIFY WHETHER A MEDICAID RECIPIENT IS ENROLLED IN MEDICARE PART D AT THE TIME A DRUG IS DISPENSED. MEDICAID WILL RECOUP DRUG CLAIMS PAID BY MEDICAID IF THE DISPENSED DATE FALLS WITHIN A PERIOD OF PART D ENROLLMENT.
